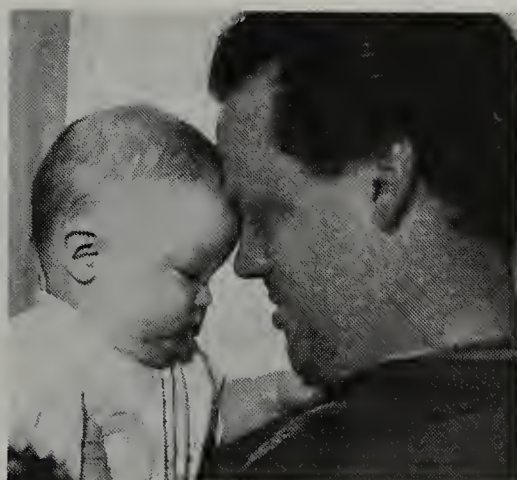


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# Giving Your

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# Best Start



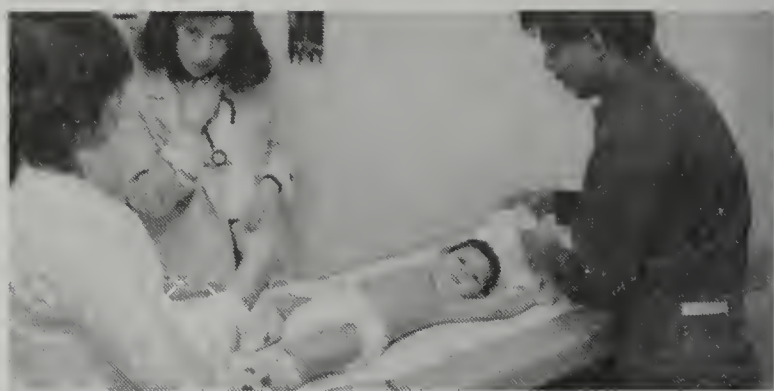
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# Prenatal Care

Illinois Department of Public Health



## **Giving Your Baby the Best Start**

### **WHY DO I NEED PRENATAL CARE?**

Your baby develops rapidly during the first 3 months of pregnancy.

Starting prenatal care early gives you a better chance to have a healthy pregnancy and a healthy baby.

You need information on diet, exercise, rest, what to expect as your pregnancy develops and what drugs and substances to avoid to be a healthy mother and have a healthy baby.

***YOUR BABY DESERVES THE BEST START  
YOU AND MEDICAL CARE CAN OFFER.***

### **WHEN DO I BEGIN PRENATAL CARE?**

Make an appointment for a pregnancy test after you have missed one monthly period.

***DON'T PUT IT OFF!***

### **WHERE DO I GO FOR PRENATAL CARE? WHAT IF I DON'T HAVE MONEY?**

Local health departments, neighborhood clinics and private health care providers offer prenatal care. *If you need help, call your local health department or:*

**Illinois Department of Public Health  
MCH Hotline 1-800-545-2200**

***EVERY PREGNANT WOMAN AND HER UNBORN  
INFANT ARE ENTITLED TO HEALTH CARE.***

**CALL FOR PRENATAL CARE TODAY**



# **WHAT IS GOING TO HAPPEN WHEN I GO FOR PRENATAL CARE?**

## **At your first visit expect:**

- **A COMPLETE HEALTH HISTORY** - this includes questions about your past and present health and past pregnancies.
- **Information about the health of your family members.**

## **Next, your health care provider will do a complete physical examination. Your health care provider should:**

- **check your blood pressure and temperature**
- **check your weight and height**
- **check your mouth and teeth for dental needs**
- **listen to your heart and lungs**
- **examine your breasts**
- **measure the size of your uterus**
- **perform an internal pelvic examination and pap smear**
- **test your blood and urine**

**The examination and tests give information that help your health care provider plan the best care for you and your baby.**

**Be sure you tell your health care provider about any medications you take, even if you buy them without a doctor's prescription. Tell your health care provider about any street drugs you use, alcohol you drink or anything you smoke.**

**This information is confidential.**

**This is very important information to help your health care provider care for you and your baby.**

**ANY DRUGS USED DURING PREGNANCY CAN BE HARMFUL TO YOUR BABY. REMEMBER, AVOID SMOKING, ALCOHOL AND DRUG USE.**

## **At your first visit ask your health provider:**

- **what hospital you will go to for the delivery of your baby**
- **for a phone number to call in case of an emergency (day or night).**

**At each visit your health care provider will:**

- check your weight gain
- test your urine
- take your blood pressure
- measure your growing uterus
- listen to your baby's heart beat

**Your health care provider should ask:**

- what you have been eating
- how you are feeling
- how often you feel the baby move

These visits are a good time for you to learn about your pregnancy, ask questions and discuss problems. Make a list of problems or questions to ask at your visits. Remember no question is too foolish. Your health care provider is ready and willing to help you.

### *ASK QUESTIONS!*

## **HOW OFTEN WILL I GO FOR PRENATAL VISITS?**

You should be seen by your health care provider at least:

- once a month for the first 6 months
- every two weeks in the 7th and 8th month, then
- in your 9th month, every week until you deliver

Some women may have more visits if problems arise.

If you don't keep an appointment call to cancel and reschedule.

***EACH APPOINTMENT IS IMPORTANT.  
DON'T SKIP THEM!***

## **WHERE WILL I GO FOR EMERGENCY TREATMENT OR DELIVERY OF MY BABY?**

Hospital \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

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**WHAT PROBLEMS OR DANGER SIGNS SHOULD I CALL MY HEALTH CARE PROVIDER ABOUT?**

Call your physician/nurse midwife/nurse practitioner/clinic if you have any concerns or questions or even if you don't feel well, but especially if you have:

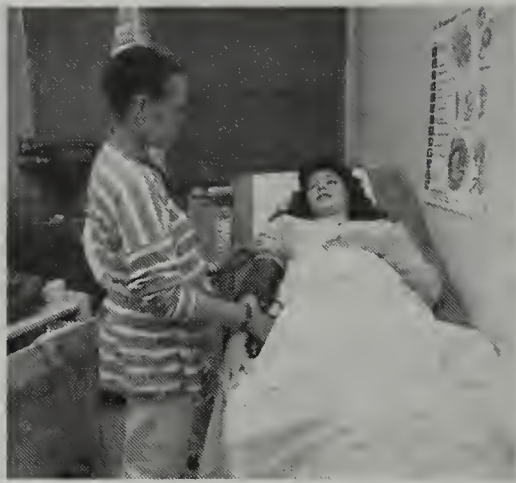
- vaginal bleeding
- vaginal discharge or a gush of fluid
- pain or burning on urination
- vomiting/constipation/diarrhea
- swelling of feet, hands or face
- severe headache
- blurred vision/double vision/seeing spots
- menstrual-like cramps/low back pain/pressure in your vagina
- signs of infection/chills/fever
- dizziness/fainting
- sharp abdominal pain
- decreased movement of the baby (usually the baby kicks 10 to 12 times in 12 hours, or if you lie down on your side after a meal the baby usually kicks 5 to 6 times in an hour.)  
Report any decrease in activity immediately!



**EMERGENCY INFORMATION. PLEASE HAVE YOUR HEALTH CARE PROVIDER COMPLETE THIS CARD FOR YOU. CARRY THIS CARD AT ALL TIMES.**

Name _____	
Address _____	
Phone _____	Allergies _____
Age _____	Gr/P _____
LMP _____	EDC _____
by US _____	
Sickle Cell _____	Bld. Type/RH _____
Titre _____	Rhogam _____
Date/H&H _____	Date _____
Glucose Screening _____	
Date/Results: _____	Pap _____
VDRL _____	GC _____
Current Medications _____	
Special Problems _____	
Prenatal Care Provider _____	
Address _____	Phone _____





**Ask your health care provider or prenatal case manager about:**

- WIC
- childbirth classes
- stop smoking classes
- a drug abuse program

**Call the hospital where you are going to deliver about:**

- a tour (so you can see where your baby will be born)
- forms that may need to be filled out before your admission to the hospital

**Don't forget to ask questions! If you don't get answers, or if you are not satisfied with the care you are getting, you have the right to change health care providers.**



**Illinois Department of Public Health  
Division of Family Health**

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